

BAR CODE MED ADMIN (BCMA) Nursing CHUI User Manual

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Department of Veterans Affairs VISTA Technical Services

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1 OVERVIEW

1.1 What is BCMA?

Bar Code Med Admin (BCMA) software is a point-of-care solution for validating the administration of medications. The initial software development and hardware research done at the Eastern Kansas Health Care System, Colmery-O'Neil Division, VISN 15, Heartland Veterans Health Network, is the basis from which the standard product is being built. The existing software functionality, in addition to enhancements identified by a functional workgroup with Nursing and Pharmacy representatives from various Veterans Integrated Services Networks (VISNs), is being replicated with a graphical user interface (GUI) (MS Windows-based) client/server architecture.

Automation of the medication administration process will improve medication administration accuracy and increase the efficiency of documentation. As each patient wristband and medication is scanned by a bar code reader, the software will validate that the medication is ordered, timely, and in the correct dosage—as well as electronically update the medication administration history. BCMA software offers a tool to augment, not replace, the clinical judgment of the medication administrator.

1.2 Features of BCMA

BCMA:

- Increases medication administration accuracy
- Captures drug accountability data
- Increases the information available to Nursing staff at the patient point of care
- Reduces wasted medications
- Improves communication between Nursing and Pharmacy staffs
- Provides a real-time Virtual Due List of orders for medication administration
- Records refused medications
- Records missing doses and sends the requests electronically to the Pharmacy
- Provides a point-of-care data entry/retrieval system
- Provides full compatibility with the existing **V***ISTA* system
- Identifies PRN entries that require effectiveness comments
- Replaces the manual Medication Administration Record (MAR) with a Medication Administration History (MAH) to provide an automatic record of a patient's medication administration information
- Provides a list of variances that identify early or late medication administrations and late PRN effectiveness entries

1.3 Intranet Documentation

Documentation for this product can now be found on the Intranet at the following address:

http://www.vista.med.va.gov/bcma

At this address is information about BCMA, including background, technical information, and important user documentation.

Remember to bookmark this site for future reference.

2 ABOUT THIS MANUAL

This manual contains a description of the Character-based User Interface (CHUI) options for the Nursing user. The manual is organized around the Medication Administration Menu Nursing Options. Accessing and using each option is explained. Included with each option are sample screen captures and reports.

An index and glossary are located at the end of this manual.

2.1 Special Instructions for the "First Time" Computer User

Users who are unfamiliar with BCMA or other Veterans Health Information Systems and Technology Architecture (VISTA) software applications are encouraged to study the DHCP Decentralized Hospital Computer Program (DHCP) User's Guide to Computing. This orientation guide is a comprehensive handbook benefiting first-time users of any VISTA application. The purpose of the introductory material is to help users become familiar with basic computer terms and the components of a computer. It is reproduced and distributed periodically by the Kernel Development Group. To request a copy, users should contact their local Information Resources Management (IRM) staff.

2.2 Special Notations—Documentation Conventions

Responses in bold face indicate what the user is to type in. Example: In the Patient/Ward field, type **P** for Patient or **W** for Ward.

Text centered between arrows represents a keyboard key that needs to be pressed in order for the system to capture a user response or move the cursor to another field. **Enter>** indicates that the Enter key (or Return key on some keyboards) must be pressed. **Tab>** indicates that the Tab key must be pressed. Example: Press **Tab>** to move the cursor to the next field, Type **Y** for Yes or **N** for No, and press **Enter>**.

Indicates especially important or helpful information.

2.3 Package Conventions

Up-arrows (caret or a circumflex)

^ In the CHUI application of BCMA, the user can move back to previous screens by entering a ^ and pressing **<Enter>**. Repeat this process until the desired screen is reached.

2.4 On-line Help

?, ??, ??? On-line help is available by entering one, two, or three question marks at a prompt. One question mark elicits a brief statement of what information is appropriate for the prompt; two question marks elicits more help, plus the hidden actions shown above; and three question marks will provide more detailed help, including a list of possible answers, if appropriate.

3 BCMA MENU—NURSING OPTION

3.1 Using the Medication Administration Menu Nursing Option

The Bar Code Med Admin (BCMA) Nursing Option Menu allows Nursing personnel to access information that has been entered via the graphical user interface (GUI) Virtual Due List (VDL). Because BCMA operates in real time, scanned information is available as soon as the scan is successfully completed. The Nursing menu as shown in Exhibit 1, BCMA Nursing Option Menu, may be accessed from any **V**ISTA-enabled terminal within the medical center.

Several of these options are available under both the Nursing and Pharmacy menu options. The options that are unique to Nursing include Edit Medication Log, Ward Administration Times, PRN Effectiveness List, Enter PRN Effectiveness, Manual Medication Entry, and Medication Variance Log.

File Edit Yiew Inois Dollars Help S 😅 単足 🛛 🐧 🚵 № F 🚔 🗇 第 🛭 🛷 <"TEST ACCOUNT""> Reset User Parameters <**TEST ACCOUNT**> Trouble Shoot Med Log Select <"TEST ACCOUNT""> Bar Code Medication Administration Manager Option: me dication admini Medication Administration Menu Nursing Nedication Administration Menu Pharmacy CHOOSE 1-2: 1 Medication Administration Menu Nursing TEST ACCOUNTY'S 2 <**TEST ACCOUNT**> 1 Medication Administration Log Missed Medications Edit Medication Log <"TEST ACCOUNT"> 4
<"TEST ACCOUNT"> 5 Ward Administration Times %*TEST ACCOUNT**> 5
 Due List

<**TEST ACCOUNT**> 6
 PRN Effectiveness List

<**TEST ACCOUNT**> 7
 Enter PRN Effectiveness

<**TEST ACCOUNT**> 8
 Manual Medication Entry

<**TEST ACCOUNT**> 9
 Medication Administration History (MAH)

<**TEST ACCOUNT**> 10
 Missing Dose Request

<**TEST ACCOUNT**> 11
 Medication Variance Log

TEST ACCOUNT> 12
 Medication Variance Log <"TEST ACCOUNT"> 12 Drug File Inquiry Select <""TEST ACCOUNT""> Medication Administration Menu Nursing Option:

EXHIBIT 1: BCMA NURSING OPTION MENU

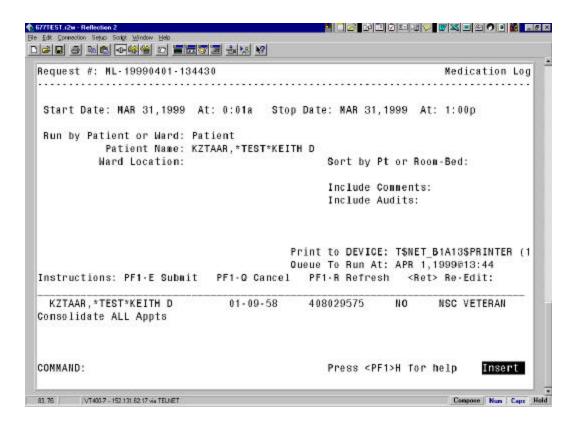
To select any of the options, perform the following steps:

- 1. Move your cursor to the Select Medication Administration Menu Nursing Option field at the bottom of the screen.
- 2. Enter the number of the desired option.
- 3. Press **Enter**> to display the sort screen for the option chosen.

3.2 Using ScreenMan Format to Request a Report

Many of the Nursing options use a common screen to define selection criteria for reports, as illustrated by Exhibit 2, Report Request Using ScreenMan Format. Other options use specific screens. This section explains the screen fields for all reports using the Report Information Sort Screen and gives instructions for entering information. Following this section are sample reports that can be run from each of the Medication Administration Menu Nursing options.

EXHIBIT 2: REPORT REQUEST USING SCREENMAN FORMAT



Many of the reports can be sorted and printed in the following ways:

- By patient. The information will display chronologically.
- By ward. The information can be sorted by patient or room/bed, and it will display chronologically within each patient.
- 1. In the Start Date field, type in the start date of the report, and press **Enter**>. (The cursor will move to the next field each time **Enter**> is pressed.)
- To display a list of standard date and time formats, enter? in any date or time field, and press **Enter**>.
- 2. In the first At field, type the start time of the report (in HHMM format), and press **Enter>**.
- 3. In the Stop Date field, type in the stop date, and press **Enter**>.
- 4. In the second At field, type the stop time (in HHMM format), and press **Enter**>.
- 5. In the Run by Patient or Ward field, type **P** for Patient or **W** for Ward, and press **Enter**>.

- (If the report is being sorted by ward) In the Ward Location field, type in the ward designation, and press **Enter**>. In the Sort by Pt or Room-Bed field, type **P** for Patient or **R** for Room, and press **Enter**>.

- (If sorting by patient) In the Patient Name field, type the patient's name, and press **Enter>**.
- To display a list of standard name formats, enter? in any Patient Name field, and press < Enter>.
- 8. In the Include Comments field, enter **Y** for Yes or **N** for No, and press **Enter**>.
- **►** If a Yes/No field is blank, just press **<Enter>** to respond No.
- 9. In the Include Audits field, enter **Y** for Yes or **N** for No, and press **Enter**>.
- 10. In the Print to Device field, type in a valid printer, and press **Enter**>.
- 11. In the Queue to Run At field, press **Enter>** to accept the date displayed, or enter a date and time and, press **Enter>**. The report will print at the time and date entered.
- 12. At the <RET> Re-Edit prompt, press **PF1** (or Num Lock) followed by **E** to submit this report for printing. Other available actions at this prompt are **PF1-Q** to Quit or **PF1-R** to Refresh the screen.
- Depending on how the user's facility is configured, either the PF1 key or Num Lock will be active. For consistency, this manual refers to the PF1 convention, but users are advised that PF1 is the same as Num Lock, if that is the active function at their sites.
- 13. The screen will now clear and the following message will appear: Submitting your report request to Taskman... Submitted! Your Task Number is: ###.

3.3 Medication Administration Log

The Medication Administration Log displays detailed administration information. The report can be sorted and printed by patient or ward, and the user can specify the date and time range that the report covers.

See Section 3.2, Using ScreenMan Format to Request a Report, for instructions on requesting a Med Log Report.

The Medication Administration Log reports will print in a 132-column output. Exhibit 3, Med Log by Patient Report, and Exhibit 4, Med Log by Ward Report, show examples of both Medication Administration Log reports.

Throughout this manual, the reports shown are provided for illustrative purposes only. Actual reports may be longer.

EXHIBIT 3: MED LOG BY PATIENT REPORT

		for Apr 14, 1999 IDUAL PATIENT	9@00:01 thru	Apr 14,	1999@1	3:00			Run Date:	JUN 10,	1999@09:2: Page:
Sex:	MALE	R,*TEST*KEITH D ONIA	H	t/Wt:	*/*		Ward:	JAN 2,1941 (58) BCMA Rm A427-02 SPECIALTY TRANSFER			
		AWBERRIES						===========			
Activity 1	Date	Orderable Item [Dose/Sched/Ro	ute/Inj Sit	e]	Admin By	Admin Date/Time	Drug/S	olution/Additive	U/Ord	U/Gvn	Unit
04/14/99 (09:00	ARTIFICIAL TEA 0600-0800-1000 00-2000-2200 O Comments:	RS [2 GTTS -1200-1400- PH] 04/14/99 14 04/14/99 14	1600-18 :00 N2 :03 N2	N2 I DI I GA	04/14/99 14:00 DN'T GIVE IT		CIAL TEARS /ML			
04/14/99 (09:04	CEFTAZIDIME [I MIN. Q12H IV I Left Upper]	NFUSE OVER nj Site: Ar <no comment<="" td=""><td>30 m, s></td><td>N2</td><td>04/14/99 09:04</td><td></td><td>IDIME - 1 GM SE 5%/WATER - 50 ML</td><td></td><td></td><td></td></no>	30 m, s>	N2	04/14/99 09:04		IDIME - 1 GM SE 5%/WATER - 50 ML			
	09:08	Comments:	[500MG 1700 PO] 04/14/99 14	:06 N2	N2 NEW	04/14/99 09:08 ORDER TO DOUBLE TH		IC ACID 500MG TAB TODAY	1.00	2.00	CAP
	09:55	Comments:	[1TABLET QD 04/14/99 09 04/14/99 09 04/14/99 14	PO] :55 N2 :57 N2 :04 N2	N2 Pati Pati THIS	04/14/99 09:57 ent Refused ent Refused ISN'T WORKING???			1.00	1.00	TAB
04/14/99	09:59	IPRATROPIUM [2 Comments:	PUFFS Q6H 04/14/99 09	INHL] :59 N2	N2 PT G	OING TO X-RAY	IPRATR	OPIUM BROMIDE INHALEF			2 PUFFS
		POTASSIUM CHLO IV Inj Site: A Comments:	RIDE [75 ml rm, Right U	/hr pper]		04/14/99 09:59	POTASS	IUM CHLORIDE - 20 MEÇ SE 5%/WATER - 1000 MI	2		
 ======== KZTAAR,*TI						408-02-9578			======== Ward: BCM		

EXHIBIT 4: MED LOG BY WARD REPORT

Continuing/PRN/ Run Date: JUL 2 LOG TYPE: WARD Page: 1	Stat/One Time Medication/Treatment 6, 1999⊕10:23	: Kecoru	(Detailed Log) (VAF 10-2970 B, C, D)		
Ward Location: B	CMA					vision: TOPEKA, KS
		Admin	Admin			
	NT (509680003)					
	CEFTAZIDIME [INFUSE OVER 30 MIN. Q12H IV Inj Site: Arm, Left Upper]			CEFTAZIDIME - 1 GM DEXTROSE 5%/WATER - 50 ML		
	POTASSIUM CHLORIDE [75 m1/hr IV Inj Site: Arm, Left Upper]		04/14/99 09:05	POTASSIUM CHLORIDE - 20 MEQ DEXTROSE 5%/WATER - 1000 ML		
04/14/99 14:48	MOISTURIZING LOTION [PRN TOP] PRN Reason: C/O ITCHING PRN Effectiveness: NO RELIEF Entered By: STUDENT, NURSE THR		04/14/99 14:48	DRY SKIN LOTION/ML	1.00	0.00
04/14/99 14:57	ACETAMINOPHEN [325-650MG Q4H PRN PO] PRN Reason: C/O H/A PRN Effectiveness: RELEIF Entered By: STUDENT, NURSE THR	N3 EE Date		ACETAMINOPHEN 325MG TAB	2.00	3.00 TAB
ARKANSAS,BCPATI Ward: BCMA Rm-	ENT (509680004) Bed: A415-01					
		N4		ARTIFICIAL TEARS /ML	1.00	1.00 2 DROPS
	CEFTAZIDIME [INFUSE OVER 30 MIN. 012H IV Inj Site: Arm, Right Upper]			CEFTAZIDIME - 1 GM DEXTROSE 5%/WATER - 50 ML		
04/14/99 09:06	ASCORBIC ACID [500MG MO-WE-FR@0900-1700 PO]	N4	04/14/99 09:06	ASCORBIC ACID 500MG TAB	1.00	1.00 TAB

3.4 Missed Medications

401-01

Medications that were not scanned as administered during an administration time window appear on the Missed Medications report. The report includes missed medication, dosage, and scheduled time. The report can be sorted and printed by ward or patient, and the user can specify the date and time that the report covers.

- Information that may appear on this report includes medications that were scheduled to be administered, but were not marked as Given, Held, or Refused. Medications placed on Hold via CPRS or Inpatient Medications V.5.0 will appear on this report with Hold in parentheses.
- The missed med by ward report should be run after each scheduled admin time. All entries appearing on this report should be resolved.

See Section 3.2, Using ScreenMan Format to Request a Report, for instructions on requesting a Missed Medications Report.

The reports will print in a 132-column output. Exhibit 5, Missed Medications by Patient Report, and Exhibit 6, Missed Medications by Ward Report, show examples of both Missed Medications reports.

EXHIBIT 5: MISSED MEDICATIONS BY PATIENT REPORT

```
MISSED MEDICATIONS from Mar 31, 1999@09:00 thru Mar 31, 1999@13:00
Run Date: MAR 31, 1999@13:19
Page: 1
Patient: KZTAAR, *TEST*KEITH D
                                                          408-02-9575 DOB: JAN 9,1958 (41)
                                                           182cm/80kg
                                             Ht/Wt: 182cm/80kg Ward: MICU-T Rm 401-01
Last Mvmt: NOV 3,1998@09:28:57 Type: SPECIALTY TRANSFER
           MATE
           IDDM
Dx:
Reactions: NKDA, EGGS, STRAWBERRIES
Administration Date/Time
                                Medication
                       ALBUTEROL INHALANT
BENZTROPINE TAB
CLOTRIMAZOLE CREAM
MULTIVITAMINS TAB
Mar 31, 1999@09:00
Mar 31, 1999@09:00
Mar 31, 1999@09:00
Mar 31, 1999@09:00
                                  CLOTRIMAZOLE CREAM. TOP
Mar 31, 1999@12:00
                                POLYVINYL ALCOHOL SOLN, OPH
Mar 31, 1999@13:00
                                  ALBUTEROL INHALANT
                                   AMOXICILLIN CAP,ORAL
Mar 31, 1999@13:00
Mar 31, 1999@13:00
Mar 31, 1999@13:00
                                   CLOTRIMAZOLE CREAM, TOP
KZTAAR *TEST*KEITH D
                                                                     408-02-9575
                                                                                                                          Ward: MICII-T Room-Bed:
```

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EXHIBIT 6: MISSED MEDICATIONS BY WARD REPORT

MISSED MEDICATION Run Date: MAR 31,	S from Mar 31, 1999@09:00 thru Mar 31, 199 1999@14:08	99@13:00	
Page: 1			
Ward Location: 3- Division: TOPEKA,			
Ward Rm-Bed		Administration Date/Time	Medication
3-1CP-T 31C-31	COSMO,RANDY B (1111)	Mar 31, 1999@09:00	ACETAMINOPHEN TAB
3-1CP-T 31C-31 3-1CP-T 31C-31	COSMO,RANDY B (1111) COSMO,RANDY B (1111)	Mar 31, 1999@09:00 Mar 31, 1999@09:00	THIORIDAZINE TAB WARFARIN TAB
3-1CP-T 31C-31	COSMO,RANDY B (1111)	Mar 31, 1999@13:00	ACETAMINOPHEN TAB
3-1CP-T 31C-31 3-1CP-T 31C-31	COSMO,RANDY B (1111) COSMO,RANDY B (1111)	Mar 31, 1999@13:00 Mar 31, 1999@13:00	DILTIAZEM TAB THIORIDAZINE TAB
3-1CP-T 31C-44	HTTELMA,*TEST*LUTHER ELISHA (1286)	Mar 31, 1999@09:00	ASPIRIN TAB,EC
3-1CP-T 31C-44	HTTELMA, *TEST*LUTHER ELISHA (1286)		ASPIRIN TAB,EC
3-1CP-T 31C-45	TRENRU,*TEST*VEODA M (6931)	Mar 31, 1999@09:00	DOCUSATE CAP,ORAL

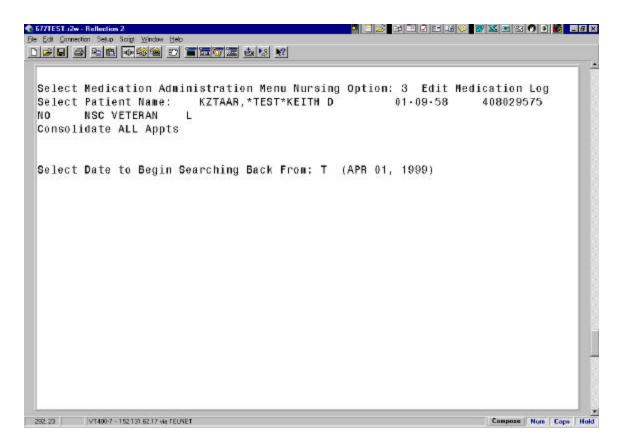
3.5 Edit Medication Log

The Edit Medication Log allows users to edit specific medication entries that have been created through the scanning processes. Orders can be edited only by the users who administered them. There is an override feature for users with the PSB Manager security key. This allows the key holder to edit any user's medication entry. All edits are audited and appear on the Medication Administration Log report. (See Section 3.3, Medication Administration Log for an example of the report.)

To edit a previously administered medication, perform the following steps:

1. On the screen illustrated in Exhibit 7, Edit Medication Log Screen, enter the patient's name or Social Security Number in the Select Patient Name field, and press **Enter**>.

EXHIBIT 7: EDIT MEDICATION LOG SCREEN



2. In the Select Date to Begin Searching Back From field, type the desired date, and press <**Enter>.** If a medication was not administered today, a screen message will appear asking if the user would like to move back one day. Press <**Enter>** to move back. This process will continue until the system reaches a date on which medications were administered. At that time, the list of medications will appear, as shown in Exhibit 8, Medication Selection Screen.

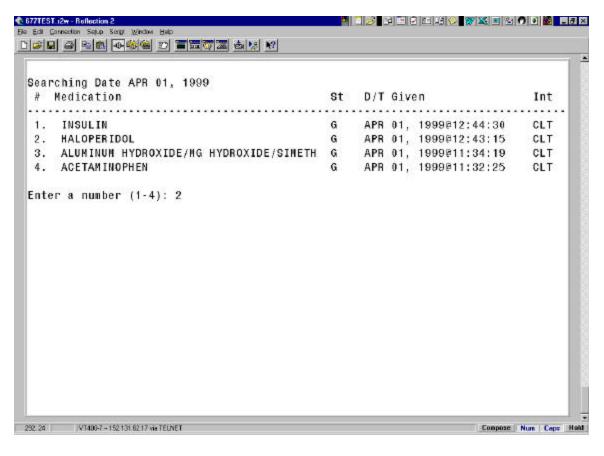


EXHIBIT 8: MEDICATION SELECTION SCREEN

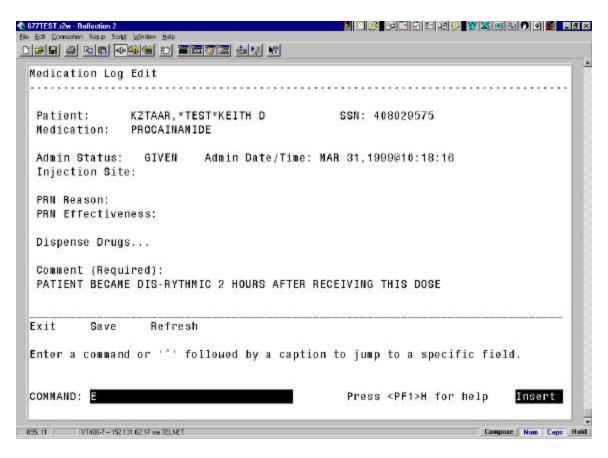
The screen will display only the medications administered by the user accessing this option. Entries made by other users will not display unless the user holds the PSB Manager security key.

The Medication Selection screen displays the following information:

- The St column displays administration status—G for Given, R for Refused, or H for Held.
- The D/T Given column displays the administration date/time.
- The Int column displays the initials of the individual who administered the medication.
- 4. In the Enter a number (1-4) field, type the number of the medication that to be edited, and press **Enter**>.

The screen illustrated by Exhibit 9, Administration Edit Screen, will display for the user to change information associated with this order.

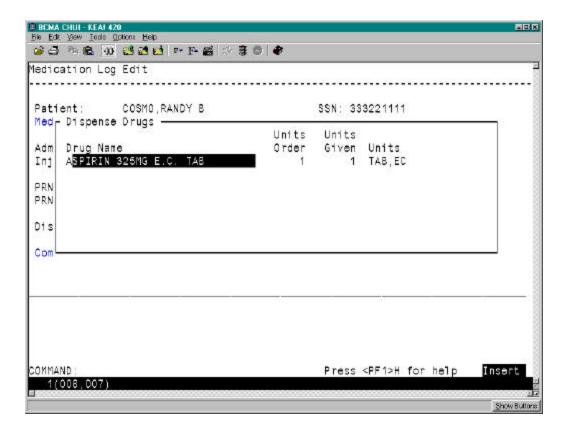
EXHIBIT 9: ADMINISTRATION EDIT SCREEN



- 5. In the Admin Status field, change the status if necessary (Valid entries are G for Given, H for Held, and R for Refused.), and press **Enter**>.
- 6. In the Admin Date/Time field, enter the date and time of the actual activity associated with this medication administration event, and press **Enter**>.
- 7. In the Injection Site field, enter an injection site (up to 30 characters) or edit an existing entry, and press **Enter**>.
- 8. In the PRN Reason field, enter the reason a PRN was administered (up to 30 characters), and press **Enter**>.
- A reason can be entered regardless of medication schedule type. The medication schedule type does not have to be PRN.
- 9. In the PRN Effectiveness field, enter the effectiveness of a PRN medication or edit the and existing entry, and press **Enter**.

10. In the Dispense Drugs field, press **Enter**>. A Dispense Drugs box will display the Dispense Drug(s) associated with this order and the number of units ordered, as shown in Exhibit 10, Dispense Drugs Selection Box.

EXHIBIT 10: DISPENSE DRUGS SELECTION BOX



- Change the dispense drug if desired, and press **Enter**>.
- A field for Units Given will display. Enter a number between 0 and 999 (up to two decimal digits) and press < Enter>.
- The Units field will display. This is a free-text field used to enter the units. Type in whatever form is being dispensed, such as tab, capsule, liquid, and so on.
- After the Dispense Drugs information is complete, press **Enter**> twice.
- At the COMMAND: Close prompt, press **Enter** again.
- 11. In the Comment (Required) field, type a free-text comment, and press **Enter**>.
- 12. In the Command field, type **S** for Save, **E** for Exit, or **R** for Refresh, and press **Enter**.
- If **E** is selected, and the data have not been saved, the system will display the following message: Save changes before leaving form (Y/N)?. If the user enters **N**, the data will not be saved. If the user enters **Y**, the changes will be saved.
- 13. The screen will display the following message: Enter RETURN to continue or '^' to exit.
 - To edit another medication entry, press **Enter**> twice.
 - To return to the main options screen, enter ^, and press < Enter>.

When a medication is marked as Held or Refused and the Med Log is edited using the CHUI menu, the Dispense Drug will not appear as the default in the Dispense Drug field; instead, the Dispense Drug field will be blank. When entering the drug name, the user must choose the Dispense Drug from a list. This feature allows users to dispense ward stock and properly document what medication was actually given to complete a med pass. This functionality may be used when the unit dose medications were not available. If the medication that was marked as H (for Held) or R (for Refused) is later administered via the GUI, Dispense Drugs will display in the Dispense Drug field when the Med Log is edited.

When using the CHUI option to change the status of a medication to Given, it is the sole responsibility of the user to ensure that the medications are documented correctly, because no scanning has occurred to validate the medication.

3.6 Ward Administration Times

The Ward Administration Times report lists current times and medications due depending on the sort criteria established by the user. The report can be sorted and printed in the following ways:

- By patient. Each medication a patient is due at each administration time is listed.
- By ward. The total number of medications due at each administration time is listed for each patient and totaled for the entire ward. This report also shows hourly totals for the ward.
- The ward report can be used to help determine workloads on a ward.

See Section 3.2, Using ScreenMan Format to Request a Report, for instructions on requesting a Ward Administration Times report.

The printed report is formatted as shown in Exhibit 11, Administration Times by Patient Report, and Exhibit 12, Administration Times by Ward Report.

EXHIBIT 11: ADMINISTRATION TIMES BY PATIENT REPORT

	DMINISTRATION TIMES ATION DATE: JUL 26, 1999					Run Date: JUL 26,	1999@14:32 Page: 1
Patient: Sex: Dx:	KZTAAR,*TEST*KEITH D MALE PNEUMONIA	Ht/Wt:	408-02-9578 */* APR 8,1999@14:07:51	Ward:	JAN 2,1941 (58) BCMA Rm A427-02 SPECIALTY TRANSFER		
	: STRAWBERRIES						
Time	Medication		Dose/Route				
1:00a	ALBUTEROL SOLN, INHL		Dosage: 3MML Route	: INHL			
5:00a 5:00a	ALBUTEROL SOLN, INHL PROCHLORPERAZINE TAB		Dosage: 3MML Route Dosage: 10MG Route				
6:00a	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	oute: OP	PH		
8:00a	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	oute: OP	H		
9:00a 9:00a 9:00a	ALBUTEROL SOLN, INHL HALOPERIDOL DECANOATE INJ MULTIVITAMINS TAB		Dosage: 3MML Route Dosage: 50MG Route Dosage: 1 TABLET 1	e: IM	20		
10:00a	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	oute: OP	Н		
11:00a 11:00a	IPRATROPIUM AEROSOL PROCHLORPERAZINE TAB		Dosage: 2 PUFFS Ro Dosage: 10MG Route		IHL		
12:00n	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	ute: OP	PH		
1:00p 1:00p	ALBUTEROL SOLN,INHL WARFARIN TAB		Dosage: 3MML Route Dosage: 5MG Route				
2:00p	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	ute: OP	Н		
4:00p	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	ute: OP	H		
5:00p 5:00p	ALBUTEROL SOLN, INHL PROCHLORPERAZINE TAB		Dosage: 3MML Route Dosage: 10MG Route				
q00:6	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	ute: OP	Н		
q00:8	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	ute: OP	Н		
9:00p 9:00p	CLOTRIMAZOLE CREAM, TOP PHENYTOIN CAP, SA		Dosage: Route: To Dosage: 300MG Rout				
10:00p	ARTIFICIAL TEARS SOLN,OPH		Dosage: 2 DROPS Ro	ute: OP	Н		
11:00p 11:00p	PROCAINAMIDE CAP,ORAL PROCHLORPERAZINE TAB		Dosage: 250MG Route Dosage: 10MG Route				
	:=====================================	=========		.=====	=======================================		

EXHIBIT 12: ADMINISTRATION TIMES BY WARD REPORT

NARD ADMINISTRATION TIMES ADMINISTRATION DATE: JUL 26,	1999																R	un L	ate:	JUL	26,		9@14 Page
Ward Location: BCMA																			E	ivis	ion:	TOF	EKA,
Patient Name Room-Bed	01								10	11	12	13		15									
JOUISIANA, BCPATIENT SSN: 509680018 Room-Bed: BCMA 310-01				 																			
MAINE,BCPATIENT SSN: 509680019 Room-Bed: BCMA 309-02				 																			
MARYLAND, BCPATIENT SSN: 509680020 Room-Bed: BCMA 308-03				 																			
		02																					==== 24
Hourly Totals: Ward Total:	5 182		3	15	5	2	5	24	5	12	5	19	6	6	5	21	5	2	5	16	5	11	

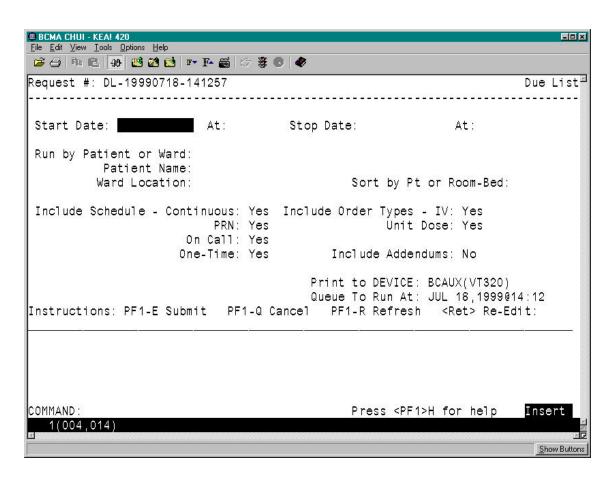
3.7 Due List

The Medication Due List displays the information on the VDL available in the GUI Menu. The report can be printed for specified date/time ranges and by patient or ward. Within patient or ward, the report may include or exclude the following:

- Continuous, PRN, On-Call, and One-time Schedule Types
- Unit-Dose or IV Route medications
- Addendums

To enter information for the report, perform the following steps to enter information on the screen illustrated in Exhibit 13, Due List Report Request Screen.

EXHIBIT 13: DUE LIST REPORT REQUEST SCREEN



- 1. In the Start Date field, type the date, and press **Enter>**.
- 2. In the first At field, type the time, and press **Enter>**.
- 3. In the Stop Date field, type a date, and press **Enter>**.
- 4. In the second At field, type a time, and press **Enter>**.
- 5. In the Run by Patient or Ward field, type **P** for Patient or **W** for Ward, and press **Enter>**.
 - (If the report is being sorted by patient) In the Patient Name field, type the patient's name, and press **<Enter>**.

- (If the report is being sorted by ward) In the Ward Location, type in the ward designation, and press < Enter>. In the Sort by Pt or Room-Bed field, type in P for Patient or R for Room/bed name, and press < Enter>.
- 6. In the Include Schedule fields, type **Y** for the desired schedule type(s) and **N** for the others and, press **<Enter>**.
- 7. In the Include Order Types, type **Y** or **N** in the IV field and Unit Dose field and press **Enter**>. If the user enters **No** in both fields, no orders will print on the report.
- 8. In the Include Addendums field, type **Y** or **N**, and press **Enter>**. When **Y** is entered, an additional section called Changes/Addendums to Orders will print at the bottom of the report. This user can use this section to manually record information about a medication administration.
- 9. In the Print to Device field, type the desired printer, and press **Enter>**.
- 10. In the <Ret> Re-Edit field, press the **PF1** followed by **E** (Exit) to submit the request for printing. (Other available actions in this field are **PF1 Q** to Quit this option or **PF1 R** to Refresh the screen.)
- 11. The screen will now clear and the following message will appear: Submitting your report request to Taskman... Submitted! Your Task Number is:###.

The reports will print in a 132-column output. Exhibit 14, Due List by Patient Report, and Exhibit 15, Due List by Ward Report, show examples of both Due List reports.

EXHIBIT 14: DUE LIST BY PATIENT REPORT

MEDICATION DUE LIST for JUL 26, 1999 (Order Type(s): IV & Unit Dose Cont:			Run Date: JUL	26, 1999@14:39 Page: 1
Patient: KZTAAR,*TEST*KEITH D Sex: MALE Dx: PNEUMONIA	Ht/Wt: */* War	3: JAN 2,1941 (58) cd: BCMA Rm A427-02 pe: SPECIALTY TRANSFE	ER	
Reactions: STRAWBERRIES				
Self		Last.	Start Stop	Verifying
Med Sched Medication	Dose	Given	Date Date	Rph/Rn
UD-C ALBUTEROL SOLN, INHL *ALBUTEROL 0.083% INHL SO 3ML EA. (7014) Spec Inst: <none entered:<="" td=""><td>DLUTION</td><td></td><td></td><td></td></none>	DLUTION			
	Admin Times: 0900	06/03/99@0904	07/05/99 08/04/9	9 RAC/RAC
UD-C ARTIFICIAL TEARS SOLN,OPF *ARTIFICIAL TEARS /ML (70				
Spec Inst: WHILE AWAKE	Give: 2 DROPS 0600-0800-1000-1200-1400-16(2000-2200 Admin Times: 0800-1000	00-1800-	07/05/99 08/04/9	9 RAC/RAC
	Changes/Addendums to order			
Spec	Give:			_
OT OC Inst:				Date:
	-1			
CON PRN Drug: Spec	Give:		Start:	Stop:
			Initials:	Date:
EZTAAR,*TEST*KEITH D	408-02-9578			======== om-Bed: A427-02

The Due List by Ward report prints one patient per page.

EXHIBIT 15: DUE LIST BY WARD REPORT

MEDICATION	DUE LIST for JUL 26, 1999 0	800-1000		======				======== 1999@14:43 Page: 1
Sex: M	ONNECTICUT,BCPATIENT ALE HEST PAIN	SSN: Ht/Wt: Last Mvmt		Ward:	DEC 3,1958 (40) BCMA Rm A427-03 SPECIALTY TRANSF	ER		
	STRAWBERRIES							
Self			-======================================		Last	Start	Stop	Verifying
	Medication		Dose		Given	Date	Date	Rph/Rn
UD-C	ARTIFICIAL TEARS SOLN,OPE *ARTIFICIAL TEARS /ML (70 Spec Inst: WHILE AWAKE		Give: 2 DROPS					
			0600-0800-1000-1200-140 2000-2200 Admin Times: 0800-1000		07/23/99@0824			
UD-C	CLOTRIMAZOLE CREAM, TOP *CLOTRIMAZOLE 1% CREAM /G Spec Inst: SMALL AMOUNT T TO AREA	M (7071)	Give: QID Admin Times: 0900		07/21/99@1601	07/12/99	08/11/99	KB/***
UD-C	MULTIVITAMINS TAB *MULTIVITAMIN TAB (5512)							
	Spec Inst: <none entered=""></none>		Give: 20meq QOD Admin Times: 0900		07/26/99@0842	07/26/99	08/25/99	KB/***
			Changes/Addendums to					
CON	PRN Drug:		Give:			Start:	Stop:	·
OT (Spec OC Inst:					initials:	Date:	
CON :	PRN Drug: Spec		Give:		s	Start:	Stop:	
OT	DC Inst:				1	Initials:	Date:	
CONNECTICUT	,BCPATIENT	=======	509-68-0007	:=====:				

3.8 PRN Effectiveness List

The PRN Effectiveness List shows administered PRN medications that require an effectiveness comment. After making an entry using the menu option Enter PRN Effectiveness, and selecting one of the medications listed on the following report, the effectiveness will be filed. That entry will no longer display on the report PRN Effectiveness List the next time it is printed.

This report may be printed by nursing ward location or patient.

See Section 3.2, Using ScreenMan Format to Request a Report, for instructions on requesting a PRN Effectiveness List.

The printed reports are formatted as shown in Exhibit 16, PRN Effectiveness List by Patient and Exhibit 17, PRN Effectiveness List by Ward.

EXHIBIT 16: PRN EFFECTIVENESS LIST BY PATIENT

PRN EFFEC	TIVENESS LIST from Apr	c 01, 1999@00:05 thru	Jul 26, 1999@08:00				Run Date: JU	L 26,	1999@14:50 Page: 1
Sex: Dx:	COSMO,RANDY B MALE COPD	SSN: Ht/Wt: Last Mvmt	333-22-1111 170cm/82kg : APR 3,1999@14:49:21	DOI Wa: Tyj	3: cd: pe:	JAN 16,1924 (75) 1-4CM-T Rm C417-01 DISCHARGE			
	: CODEINE				.===:				
Administr		Medication			iste	red By			
	999@07:46:30 Reason: Anxiety	LORAZEPAM		TUCKEI	R,CH	RIS			
	999@08:43:03 Reason: Constipation	MAGNESIUM HYDROXIDE		TUCKEI	R,CH	RIS			
	999@08:48:42 Reason: Anxiety	LORAZEPAM		TUCKE	R,CH	RIS			
	999@09:29:14 Reason: Pain	ACETAMINOPHEN		TUCKE	R,CH	RIS			
	999@09:39:52 Reason: Constipation	MAGNESIUM HYDROXIDE		TUCKE	R,CH	RIS			
	999@15:34:02 Reason: Anxiety	LORAZEPAM		PETIT	, DAN	R			
	999@11:06:14 Reason: Discomfort	ACETAMINOPHEN		PETIT	, DAN	R			
COSMO, RAN			333-22-111		====		Ward: 1-4CM-T		

EXHIBIT 17: PRN EFFECTIVENESS LIST BY WARD

PRN EFFECTIVENESS LIST from Ag	or 01, 1999@08:00 thru Jul 26, 1999@05:00		Run Date: JUL 26, 1999@14:52 Page: 3
Ward Location: BCMA			Division: TOPEKA, KS
Patient Administration Date/Time	Ward Rm-Bed	Administered By	
APR 14, 1999@15:32:40 PRN Reason: pain	ACETAMINOPHEN	STUDENT, NURSE TWELVE	
ILLINOIS, BCPATIENT	BCMA C517-01		
APR 13, 1999@10:48:08 PRN Reason: Fever	ACETAMINOPHEN	STUDENT, NURSE THIRTEEN	
APR 14, 1999@15:32:43 PRN Reason: Agitation		STUDENT, NURSE THIRTEEN	
INDIANA, BCPATIENT	BCMA C521-01		
APR 13, 1999@13:35:17 PRN Reason: Elevated	INSULIN REGULAR (HUMULIN) Blood Sugar	STUDENT, NURSE FOURTEEN	
APR 14, 1999@12:39:39 PRN Reason: BS 400	INSULIN REGULAR (HUMULIN)	STUDENT, NURSE FOURTEEN	
APR 14, 1999@14:48:30 PRN Reason: INC.BS	INSULIN REGULAR (HUMULIN)	STUDENT, NURSE FOURTEEN	
IOWA, BCPATIENT	BCMA C522-01		
APR 13, 1999@10:48:12 PRN Reason: Fever	ACETAMINOPHEN	STUDENT, NURSE FIFTEEN	
APR 14, 1999@14:49:35 PRN Reason: FOR NAUSE	PROCHLORPERAZINE EA	STUDENT, NURSE FIFTEEN	

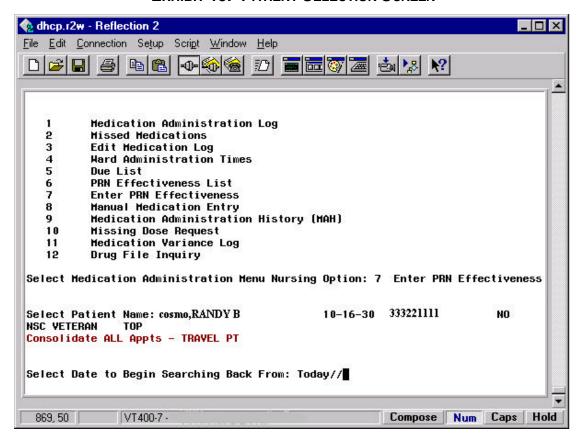
3.9 Enter PRN Effectiveness

This option allows Nursing to enter effectiveness comments concerning PRN medications that were administered.

To enter PRN Effectiveness comments, perform the following steps:

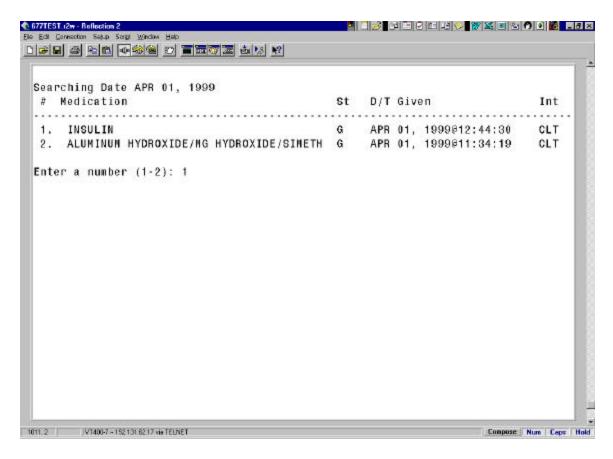
1. On the BCMA Nursing Option Menu, select option **7**, Enter PRN Effectiveness, and press **Enter**>. Additional information entry fields will display, as illustrated in Exhibit 18, Patient Selection Screen.

EXHIBIT 18: PATIENT SELECTION SCREEN



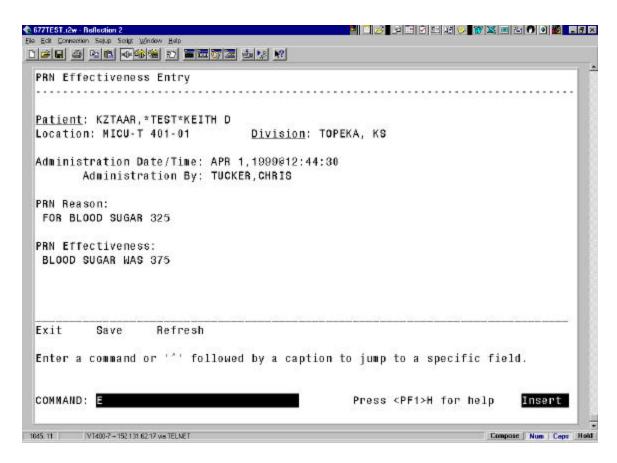
- 2. In the Select Patient Name field, type the patient's name, and press **Enter>**.
- 3. At the Select Date to Begin Searching Back From field, press **Enter**> to select today's date.
 - If the medication was not administered today, a screen message will appear asking if the user would like to move back one day. Press < Enter> to move back. This process will continue until the system reaches a date on which medications were administered. At that time, the list of medications will appear as shown in Exhibit 19, Medication Selection Screen.





- 4. Enter the number corresponding to the medication needing an effectiveness comment, and press **Enter**>.
- 5. The effectiveness comments entry screen displays, as shown in Exhibit 20, PRN Effectiveness Entry Screen.





- 6. In the PRN Effectiveness field, type a comment up to 78 characters long, and press **Enter**>.
- 7. In the Command field, type **S** for Save, **E** to Exit, or **R** for Refresh, and press **Enter**>.
- If the user tries to exit the screen and the data has not been saved, the system will display the following message: Save changes before leaving form (Y/N)?. If the user enters N, the data will not be saved. If the user enters Y, the changes will be saved.

3.10 Manual Medication Entry

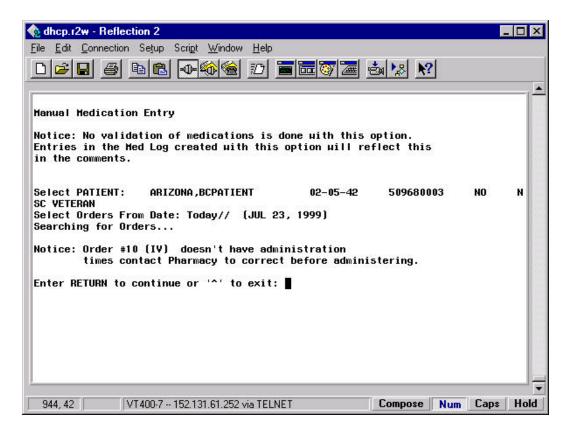
The Manual Medication Entry option allows the user to manually create a medication administration entry for any order.

Medication orders will not be electronically validated with this option. However, the Medication Log will include comments and audits for any order that was entered using the Manual Medication Entry option.

To enter information for the report, perform the following steps:

1. In the Select Patient field of the screen illustrated in Exhibit 21, Manual Medication Entry Patient Selection Screen, type the patient's name or SSN, and press **Enter**>.

EXHIBIT 21: MANUAL MEDICATION ENTRY PATIENT SELECTION SCREEN



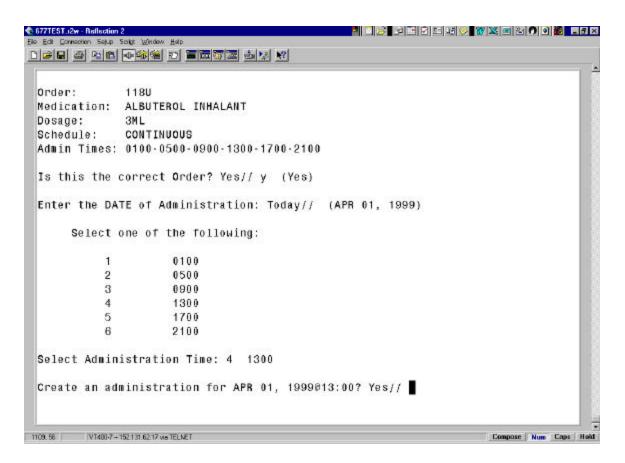
- 2. In the Select Orders From Date: Today// field, press **Enter>** to select today's date, or enter a date and press **Enter>**.
- 3. At the Enter RETURN to continue or '^' to exit field, press **Enter>** to continue with the entry. (To return to the main options menu, enter ^, and press **Enter>**.)
- 4. A list of orders for this patient will display as shown in Exhibit 22, Manual Medication Entry Medication Screen.

EXHIBIT 22: MANUAL MEDICATION ENTRY MEDICATION SCREEN

```
Manual Medication Entry
 # Sc Medication
                                          St
                                          (A) Start: 07/26/1999 0600
Stop: 08/09/1999 2400
 1. C ASPIRIN TAB, EC
       Admin Times: 0900
 2. C CEFEPIME INJ, PWDR
                                         (D) Start: 06/28/1999 1435
                                               Stop: 07/26/1999 1037
       Admin Times: 1630
 3. C CEFEPIME INJ, PWDR
                                       (A) Start: 07/26/1999 1037
                                               Stop: 08/09/1999 2400
       Admin Times: 0900
 4. C DILTIAZEM (TIAZAC) CAP, SA
                                        (A) Start: 07/26/1999 0700
                                               Stop: 08/09/1999 2400
       Admin Times: 0900
 5. C MULTIVITAMINS TAB
                                         (A) Start: 07/26/1999 0700
                                               Stop: 08/09/1999 2400
       Admin Times: 0900
                                         (E) Start: 06/30/1999 0905
 6. O LORAZEPAM TAB
                                               Stop: 06/30/1999 0905
 7. O SODIUM BIPHOSPHATE/SODIUM PHOSPHATE ENEMA (E)
                                             Start: 06/30/1999 0905
Stop: 06/30/1999 0905
 8. P HYDROCORTISONE CREAM, TOP
                                        (A) Start: 07/20/1999 0856
                                               Stop: 08/03/1999 2400
Enter a number (1-8):
```

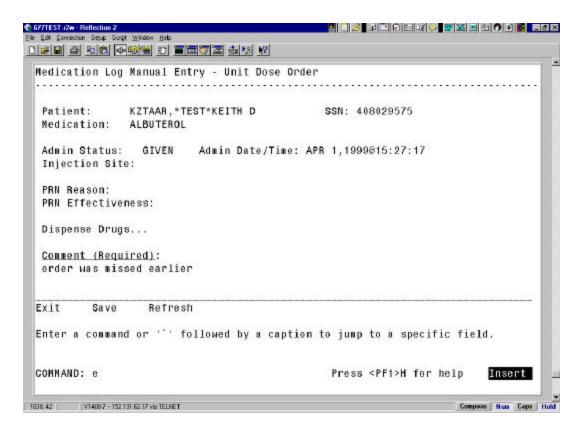
5. In the Enter a number field, enter the desired medication line number shown in the list. Press **Enter>.** The screen illustrated in Exhibit 23, Administration Time Selection Screen, will display.





- 4. In the Is this the correct Order? Yes// field press **Enter>** to accept the order. (If the user enters **No**, the screen reverts to the Manual Medication Entry Medication Selection Screen, shown in Exhibit 22.)
- 5. In the Enter the Date of Administration field, enter the desired date, and press **Enter**>.
- 6. In the Select Administration Time field, enter the number of the desired administration time from the list on the screen. Press **Enter**>.
- 7. The administration date and time will display in the Create An Administration field. If the date and time are correct, press **Enter**>. (If the date and time are not correct, enter **No** in the Create An Administration field. The screen will revert to the Manual Medication Entry Medication Selection Screen, as shown in Exhibit 22.) The manual entry screen displays, as shown in Exhibit 24, Medication Log Manual Entry Screen.





- 14. In the Admin Status field, type in **G** for Given, **H** for Held, or **R** for Refused, and press <**Enter>**.
- 15. In the Admin Date/Time field, enter the actual administration date and time, and press **Enter**>.
- 16. In the Injection Site field, enter a free-text comment, and press **Enter**>.
- 17. In the PRN Reason field, enter a free-text comment, and press **Enter**>.
- 18. In the PRN Effectiveness field, enter a free-text comment, and press **Enter**>.
- 19. In the Dispense Drugs field, press **Enter**>. A Dispense Drugs box will display the Dispense Drug(s) associated with this order and the number of units ordered.
 - Change the dispensed drug if desired, and press **Enter**>.
 - A field for Units Given will display. Enter a number between 0 and 999 (up to two decimal digits) and press < Enter>.
 - The Units field will display. This is a free-text field used to enter the units. Type in whatever form is being dispensed, such as tab, capsule, liquid, and so on.
 - After the Dispense Drugs information is complete, press **Enter**> twice.
 - At the COMMAND: Close prompt, press **Enter** again.
- 20. In the Comment (Required) field, type a free-text comment, and press **Enter**>.
- 21. In the Command field, type **S** for Save, **E** for Exit, or **R** for Refresh, and press **Enter**>.
- If **E** is selected, the user will be prompted with the following message: Save changes before leaving form (Y/N)? Type **Y** for Yes to save the changes.

22. The screen will display the following message: Enter RETURN to continue or '^' to exit.

- To create another medication administration entry, press **Enter**> twice.
- To return to the main options screen, enter ^.

3.11 Medication Administration History (MAH)

The electronic MAH can be printed for a specified date range for a single patient or a ward and shows medications that have been marked as Given, Held, or Refused.

The report prints a 7-day history, running from Sunday to Saturday. For example, if the user enters Start and Stop Dates that fall in the middle of a week, the report will show the medication history from the previous Sunday to the following Saturday.

See Section 3.2, Using ScreenMan Format to Request a Report, for instructions on requesting the MAH.

Exhibit 25, MAH by Patient Report, shows an example of the MAH report.

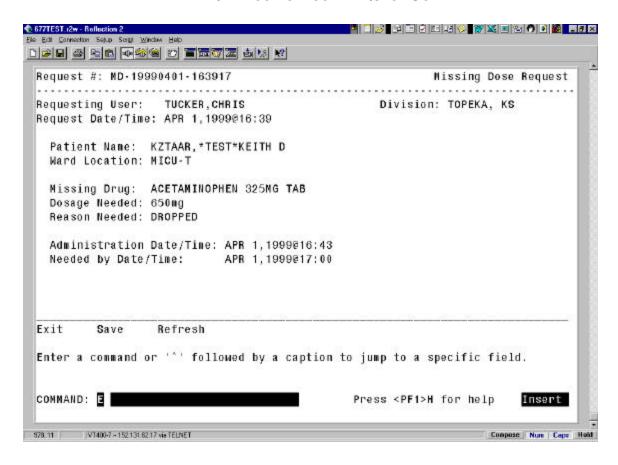
EXHIBIT 25: MEDICATION ADMINISTRATION HISTORY BY PATIENT REPORT

Run Date: JUL 26, 1999@10:53								Page: 1
Patient: KZTAAR,*TEST*KEITH D Sex: MALE Dx: PNEUMONIA		SSN: 400 Ht/Wt: */ Last Mvmt: API	*	Ward:	BCMA Rm A4:	27-02		
Reactions: STRAWBERRIES								
Start Stop Date Date	Admin	 04/11/1999					 04/16/1999	04/17/1999
04/14/1999 05/14/1999 24:00 ACETAMINOPHEN TAB ACETAMINOPHEN 325MG TAB Give: 650MG PO Q6H	0500 1100 1700 2300				0519 N2 R1130 N2 1729 N3 2255 N3	0515 N2 H1146 N2 1746 N3 2310 N3		
RPH: P2 RN: N2	İ	İ					İ	İ
04/13/1999 04/23/1999 24:00 AMOXICILLIN CAP,ORAL AMOXICILLIN 250MG CAPS Give: 250MG PO Q8H Spec Inst: FOR 10 DAYS ONLY	0500 1300 2100 	 		1324 N2 		1400 N2 	 	
RPH: P2 RN: N2	 	 				 	 	
04/13/1999 05/13/1999 24:00 ARTIFICIAL TEARS SOLM,OPH ARTIFICIAL TEARS /ML Give: 2 STTS OPH 0600-0800-1000-1200-1400-16001800-2000-2200 Spec Inst: WHILE AWAKE RPH: P2 RN: N2	0600 0800 1000 1200 1400 1600 1800 2000				0913 N2 1400 N2	1325 N3 1330 N2 1400 N2 1401 N2		

3.12 Missing Dose Request

This option allows the user to submit a Missing Dose Request to Pharmacy using the screen illustrated in Exhibit 26, Missing Dose Request Screen. Once submitted, the request prints on a predefined printer and an electronic MailMan message is sent to the predefined mail group.

EXHIBIT 26: MISSING DOSE REQUEST SCREEN



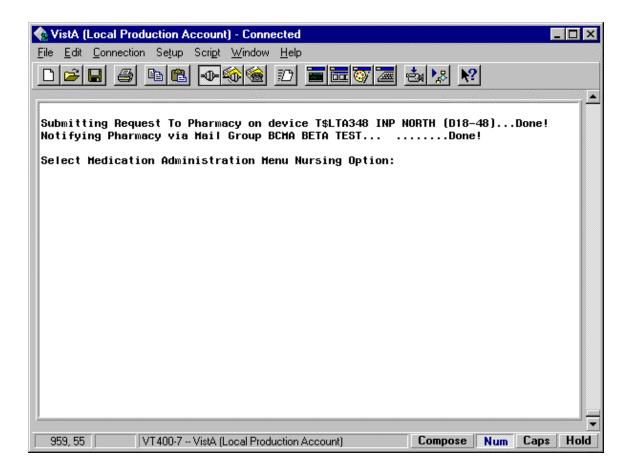
To enter a Missing Dose Request, perform the following steps:

- 1. In the Patient Name field, type the patient's name, and press **Enter>**.
- 2. In the Ward Location field, type the ward designation, and press **Enter>**.
- 3. In the Missing Drug field, type the medication, and press **Enter>**.
- To view a list of appropriate formats for the Missing Drug field, type a ? in the Missing Drug field and press **Enter**. Explanation of the ways to enter a medication will display on the bottom part of the screen.
- 4. In the Dosage Needed field, type the dosage, and press **Enter>**.
- 5. In the Reason Needed field, type a reason, and press **Enter>**.
- To view a list of allowable reasons, type ? in the Reason Needed field, and press < Enter>. The list of reasons will display on the bottom part of the screen.

6. In the Administration Date/Time field, type a date and time (in date@time format), and press **Enter>**.

- 7. In the Needed by Date/Time: field, type a date and time (in date@time format), and press **Enter>**.
- 8. In the COMMAND field, type **S** for Save, **E** for Exit, or **R** for Refresh, and press **Enter**>.
- If the user tries to exit the screen and the data has not been saved, the system will display the following message: Save changes before leaving form (Y/N)?. If the user enters N, the data will not be saved. If the user enters Y, the changes will be saved. The menu selection screen will display with a message confirming that the request has been submitted to Pharmacy via the appropriate mail group, as shown in Exhibit 27, Missing Dose Request Confirmation Screen.

EXHIBIT 27: MISSING DOSE REQUEST CONFIRMATION SCREEN



The Missing Dose Request will print on the designated printer. The e-mail message that is generated appears as shown in Exhibit 28, Missing Dose E-mail Notification

EXHIBIT 28: MISSING DOSE E-MAIL NOTIFICATION

Subj: Missing Dose Request Entered [#7765114] 01 Apr 99 05:57 11 Lines

From: ACME Pill Pushers in 'IN' basket. Page 1 **NEW**

A request for a missing dose has been entered into the system.

Request IEN#: 15694

User Entering: DOMNANISH, JOAN

Patient: KZTAAR,*TEST*KEITH D

Ward Location: A3MED IM-L

Drug: ACETAMINOPHEN 325MG

Dose: 650MG

Time Needed: APR 1,1999@1700

Thank You

Select MESSAGE Action: IGNORE (in IN basket)//

3.13 Medication Variance Log

With the Medication Variance Log, users with the PSB Managers security key can print or display exceptions to medication administration.

See Section 3.2, Using ScreenMan Format to Request a Report, for instructions on requesting a Medication Variance Log.

The Variance Log can run by patient or by ward, as shown in Exhibit 29, Medication Variance Log Report by Patient, and Exhibit 30, Medication Variance Log Report by Ward.

EXHIBIT 29: MEDICATION VARIANCE LOG REPORT BY PATIENT

MEDICATIO	N VARIANCE LO	G					Run Date: JT	љ 26, 1999@15:0 Раде:
Sex:	COSMO, RANDY I MALE COPD	В	Ht/Wt:	333-22-1111 170cm/82kg APR 3,1999@14:49:21	Ward:	JAN 16,1924 (75) 1-4CM-T Rm C417-01 DISCHARGE		
Reactions	: CODEINE	===========	========	=======================================	======	=======================================		=========
Event Dat	e/Time	Event	Var	Medication				
JUL 16, 1 JUL 16, 1	999@12:54:35 999@14:49:11	EARLY/LATE DOSE EARLY/LATE DOSE EARLY/LATE DOSE EARLY/LATE DOSE	774 -84	POTASSIUM CHLORIDE POTASSIUM CHLORIDE BACITRACIN PHENYTOIN				
COSMO, RAN	 DY B	=======	=======	333-22-1111	======		======== ard: 1-4CM-T	======================================

A variance preceded by a minus sign (such as -24) indicates the number of minutes a medication was given <u>before</u> the administration time.

EXHIBIT 30: MEDICATION VARIANCE LOG REPORT BY WARD

MEDICATION VARIAN	NCE LOG				Run Date: JUL 26, 1999@15:1 Page:				
Ward Location: BCMA Division: TOPEKA, F									
Ward	Patient Name	Event Date/Time	Event	Var	Medication				
 BCMA C517-01	ILLINOIS, BCPATIENT	APR 14, 1999@14:31:32			POTASSIUM CHLORIDE				
		APR 14, 1999@14:31:32			ACETAMINOPHEN				
		APR 14, 1999@14:31:32			IPRATROPIUM				
		APR 14, 1999@14:31:32			ARTIFICIAL TEARS				
		APR 14, 1999@15:23:08							
		APR 14, 1999@15:50:41		-430	PROCHLORPERAZINE				
BCMA C521-01	INDIANA, BCPATIENT	APR 14, 1999@14:31:32	EARLY/LATE DOSE	545	POTASSIUM CHLORIDE				
		APR 14, 1999@14:31:32	EARLY/LATE DOSE	-200	DIGOXIN				
		APR 14, 1999@14:49:40	EARLY/LATE DOSE	109	MOISTURIZING LOTION				
		APR 14, 1999@15:01:07	EARLY/LATE DOSE	511					
		APR 14, 1999@15:02:06	EARLY/LATE DOSE	511					
BCMA C522-01	IOWA, BCPATIENT	APR 14, 1999@14:31:32	EARLY/LATE DOSE	546	POTASSIUM CHLORIDE				
		APR 14, 1999@14:31:32	EARLY/LATE DOSE	580	POTASSIUM CHLORIDE				
		APR 14, 1999@14:53:47	EARLY/LATE DOSE	-127					
		APR 14, 1999@14:54:31	EARLY/LATE DOSE	-127					
		APR 14, 1999@14:55:51	EARLY/LATE DOSE	-125	ASCORBIC ACID				
		APR 14, 1999@15:01:29	EARLY/LATE DOSE	121	DIGOXIN				
BCMA 308-04	KANSAS, BCPATIENT	APR 14, 1999@14:31:32		545	POTASSIUM CHLORIDE				
		APR 14, 1999@14:55:43		115	AMOXICILLIN				
		APR 14, 1999@15:01:07	EARLY/LATE DOSE	121	DIGOXIN				
BCMA 309-01	KENTUCKY, BCPATIENT	APR 14, 1999@14:31:31		266	CEFTAZIDIME				
		APR 14, 1999@14:31:32		480	POTASSIUM CHLORIDE				
		APR 14, 1999@14:31:32		-180	AMOXICILLIN				
		APR 14, 1999@14:31:32		-453	CEFTAZIDIME				
		APR 14, 1999@14:31:32		785	POTASSIUM CHLORIDE				
		APR 14, 1999@14:31:32		820	POTASSIUM CHLORIDE				
		APR 14, 1999@15:04:30		-116	ASCORBIC ACID				
		APR 15, 1999@13:46:31		526	IPRATROPIUM				
		APR 15, 1999@13:46:45		166	IPRATROPIUM				
		APR 15, 1999@13:48:56	EARLY/LATE DOSE	228	ARTIFICIAL TEARS				

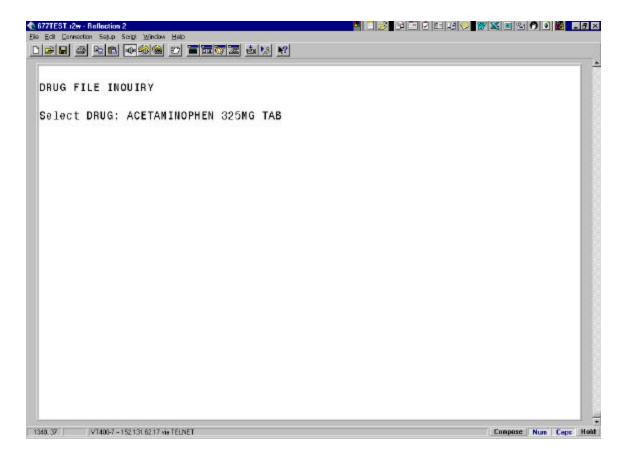
3.14 Drug File Inquiry

The Drug File Inquiry allows Nursing and Pharmacy to check the bar coded IEN numbers listed on unit dose drugs. If the incorrect bar code is affixed, the Drug File Inquiry will help the user resolve the discrepancy.

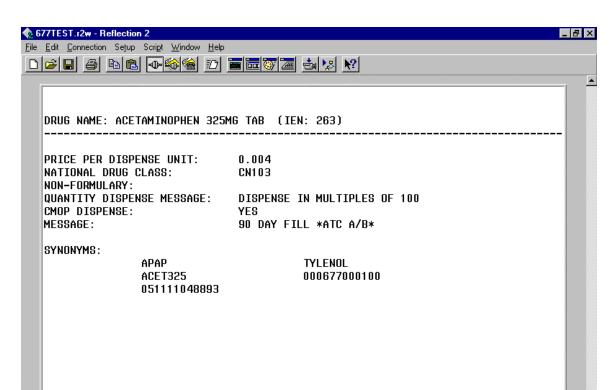
To run a Drug File Inquiry, perform the following steps:

- 1. In the Select Drug field of the screen, as shown in Exhibit 31, Drug File Inquiry Screen 1, type the name and dosage of the drug, and press **Enter**.
- To display a list of standard formats for listing a medication, enter? in the Select Drug field, and press **Enter**.





2. The Drug File information will display, as illustrated in Exhibit 32, Drug File Inquiry Screen 2.



Compose Num Caps Hold

EXHIBIT 32: DRUG FILE INQUIRY SCREEN 2

The Internal Entry Number (IEN) appears on the first line, to the right of the Drug Name. This IEN is unique to this drug file entry. In most cases, it is the bar coded number on the unit-dose packages that are created in the pharmacy. Manufacturers National Drug Code (NDC) bar codes may appear in the synonym field of this display. If the drug is non-formulary, the Non-Formulary field will be set to N/F.

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4 GLOSSARY

This section contains acronyms and definitions for terms used in this document.

4.1 Acronyms

BCMA Bar Code Med Admin

CHUI Character-based User Interface

CPRS Computerized Patient Record System

GUI Graphical User Interface

HFS Host File Server

HSM Hospital supplied self-medications

IEN Internal Entry Number

MAH Medication Administration History

N/F Non-formulary

NCD National Drug Code
PC Personal computer
PRN Pro Re Nata [Latin]

SM Self-medications

TCP/IP Transmission Control Protocol/Internet Protocol

VA Department of Veterans Affairs

VAMC Veterans Affairs Medical Center

VDL Virtual Due List

VHA Veterans Health Administration

VISN Veterans Integrated Services Network

VISTA Veterans Health Information Systems and Technology Architecture

4.2 Definitions

Audits Tracking changes to records including old data, new data, and the name

of the user who made the change.

BCMA Bar Code Med Admin is a **V**IST**A** software application that validates

medications against active orders prior to being administered to the

patient.

CPRS The Computerized Patient Record System is a VISTA software

application that provides an integrated patient record system for use by

clinicians, managers, quality assurance staff, and researchers.

Given When a medication is administered to the patient, it is considered

Given.

HFS Host File Server is a system (WinNT/Dec Alpha) file access

mechanism that enables the M software to access the system-level files.

IEN Drug The internal drug number (IEN) that is entered into Inpatient

Code Medications V. 5.0

Not Given A medication that is intentionally Not Given for a specified reason.

Omitted A medication that was not given during the medication pass because it

was unintentionally missed.

PRN Latin abbreviation for *pro re nata* meaning "as needed."

ScreenMan VA FileMan's ScreenMan utility provides a screen-oriented interface

for editing and displaying data.

SRS Document which outlines the functional requirements for a project.

TCP/IP A protocol developed by the Department of Defense for

communications between computers. TCP/IP has become the standard

for data transmission over networks, including the Internet.

VA FileMan VISTA's database management system.

VDL The Virtual Due List is a GUI application used by nurses when

administering medications.

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